

36/6/6

COUNTY OF KINCARDINE



REPORT

BY THE

MEDICAL OFFICER OF HEALTH

ON THE

Health and Sanitary Conditions

FOR THE YEAR

1954

COUNTY OF KINCARDINE.

THIRD REPORT

by the

MEDICAL OFFICER OF HEALTH

for the year

1954

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P R E F A C E.

My Lords, Ladies and Gentlemen,

In accordance with the requirements of the Department of Health for Scotland, I beg to submit my Third Annual Report for the year 1954 on the Health of the County of Kincardine and of its constituent Burghs. In separate Reports, the Chief County Sanitary Inspector and the Burgh Sanitary Inspectors deal with the Sanitary Conditions of the County and of the respective Burghs.

The Report on the School Health Service is submitted as an Appendix to this Report and it deals with the period 1st August, 1953 to 31st July, 1954. The statistics of my Report as Medical Officer of Health relate to the period from 1st January to 31st December, 1954.

The data available in the Report will show that the health of the County continues to be satisfactory.

During the year several cases of Poliomyelitis occurred in this County. These cases occurred at a time when there were similar outbreaks in other Counties in Scotland. As far as the Kincardineshire cases are concerned these are dealt with in some detail in the Section of the Report dealing with the Control of Infectious Diseases.

I wish to record my sincere thanks to all members of the County Council and the Health and Welfare Committee and to the officials attached to my Department for their loyalty, co-operation and ever-willing help. The assistance given me on all occasions by the County Clerk and by members of other Departments of the Council is sincerely appreciated.

I am,
My Lords, Ladies and Gentlemen,
Your Obedient Servant,

ALEX. HENDERSON.

Medical Officer of Health.

Health and Welfare Department,
"The Briars",
56, Arduthie Road,
STONEHAVEN.

14th June, 1955.



STATISTICAL SUMMARY.

As in previous Reports, the following Statistical Summary for each of the years from 1951 to 1954 is appended for easy reference.

	1951	1952	1953	1954
1. Acreage	262,798	262,798	242,384	242,384
2. Population (estimated civilian)	27,970	27,792	27,743	27,943
3. Persons married per 1,000 population	6.3	6.3	5.5	5.5
4. Number of live births (corrected)	475	441	457	447
5. Birth-rate per 1,000 population	17.0	15.9	16.5	16.0
6. Illegitimate Birth-rate per 1,000 births	6.1	5.4	6.3	6.5
7. Infant Death-rate per 1,000 births	21	29	22	31
8. Number of Maternal Deaths ...	-	-	3	1
9. Number of Deaths from all forms of Tuberculosis	5	1	2	3
10. Number of Deaths from Respiratory Tuberculosis	5	-	2	2
11. Death-rate from all forms of Tuberculosis per 1,000 population	0.18	0.04	0.07	0.11
12. Death-rate from Respiratory Tuberculosis per 1,000 population	0.18	-	0.07	0.07
13. Number of Deaths (corrected) - All causes	330	315	334	309
14. Death-rate - All Causes ...	11.8	11.3	12.0	11.1

S T A F F.

The staff of the Health and Welfare Department consists of the Medical Officer of Health who is also School Medical Officer, and a part-time Maternity and Child Welfare Officer. In connection with the School Health Service there is one Chief Dental Surgeon and one part-time Dental Surgeon.

The Local Authority's duties, as far as Welfare aspects are concerned, are under the administrative control of the Medical Officer of Health. In Welfare duties he has the services of an Assistant Welfare Officer who also acts as Authorised Officer.

The Health and Welfare Department Staff suffered a great loss on account of the very sudden death on 18th November, 1954, of Mr. George Stephen, Assistant Welfare Officer. I would like to put on record my appreciation of the good work which was done by the late Mr. Stephen. He was held in high esteem both by his colleagues and by the members of the Public with whom he came in contact.

The Sanitary Staff consists of the Chief Sanitary Inspector and two Assistant Sanitary Inspectors.

The Health of the County of Kincardine.

S E C T I O N 1.

VITAL STATISTICS.

Population.

The population, as estimated by the Registrar-General to the middle of the year was 27,943. In 1953, the estimated population was 27,743.

Births.

The total number of births, the birth-rate, the number of illegitimate births and the illegitimate birth-rate during the past four years were as follows:-

Year	Males	Females	Total	Birth-rate	Illegitimate Births	Illegitimate Birth-rate
1951	247	228	475	17.0	29	6.1
1952	210	231	441	15.9	24	5.4
1953	227	230	457	16.5	29	6.3
1954	218	229	447	16.0	29	6.5

Marriages.

The number of marriages and the marriage-rates in 1951, 1952, 1953 and 1954 are given hereunder:-

In 1951 the number of marriages was 175 and the rate was 6.3

In 1952 " " " " " 175 " " " " 6.3

In 1953 " " " " " 152 " " " " 5.5

In 1954 " " " " " 155 " " " " 5.5

Deaths.

The number of deaths and the death-rates for the years 1951, 1952, 1953 and 1954 were as follows:-

Year	Number	Males	Females	Death-rate
1951	330	162	168	11.8
1952	315	153	162	11.3
1953	334	163	171	12.0
1954	309	145	164	11.1

The/

The following table shows the causes of death in the past four years:-

Causes of Death	1951	1952	1953	1954
Diseases of the Heart and other Circulatory Diseases	129	153	132	157
Cerebral Haemorrhage and other Diseases of Nervous System	49	36	69	46
Respiratory Diseases -				
Bronchitis	5	1	4	3
Pneumonia	13	7	11	9
Other	4	3	2	-
Cancer	60	53	51	41
Tuberculosis -				
Respiratory	5	-	2	2
Non-respiratory	-	1	-	1
Kidney Diseases	7	8	6	5
Chief Epidemic Diseases -				
Diphtheria	-	-	-	-
Whooping Cough	1	-	-	-
Measles	-	1	1	-
Scarlet Fever	-	-	-	-
Enteric Fever	-	-	-	-
Cerebro-Spinal Fever	-	-	-	-
Other Infectious and Parasitic Diseases	-	-	1	2
Diabetes Mellitus	-	2	2	-
Diseases of Digestive System, including Diarrhoea and Enteritis	13	8	13	8
Influenza	1	1	1	-
Diseases associated with child-birth	-	-	3	1
Diseases of Early Infancy	8	8	7	12
Violence, including Suicide	12	12	14	10
Other causes	23	21	15	12
TOTALS	330	315	334	309

Once again the commonest causes of death were diseases of the heart and other circulatory disorders. It will be noted that these accounted for 157 deaths, an increase of 25 as compared with the previous year. On the other hand the number of deaths from cancer was 41 - 10 less than in the previous year - and the lowest figure in the last five years. In fact the number of deaths from cancer has declined each year since 1950.



SECTION 11.

LOCAL HEALTH AUTHORITY FUNCTIONS.

A.1 CARE OF MOTHERS AND YOUNG CHILDREN.

(1) Ante-natal and Post-natal Services.

The establishment of Ante-natal and Post-natal Clinics within the County of Kincardine has not so far been considered necessary. Such Clinics have been established at Castle Terrace in the City of Aberdeen. To these Clinics, women from this County are referred as and when necessary.

(2) Child Welfare Clinics.

As stated in the 1953 Report, the Local Authority has established five Clinics in the County - one in each of the four Burghs and a fifth Clinic at Cove Bay.

During the year a new combined Child Welfare and Dental Clinic was under construction in Banchory. It is expected that this new Clinic will be in active operation early in 1955.

The attendances at the five existing Clinics were as under:-

(a) Number of children who on date of first attendance were -

Under 1 year of age	...	...	331
Over 1 year of age	...	...	459

(b) Total number of attendances of children who at the time of attendance were -

Under 1 year of age	...	...	1,834
Over 1 year of age	...	...	1,930

Comparing the total attendances, we find that, in the previous year, the numbers attending were -

Under 1 year of age	...	...	1,928
Over 1 year of age	...	...	1,993

Reference must, in this connection, be made at this point to the outbreak of Poliomyelitis which occurred in this County during the year under review. This outbreak of Poliomyelitis affected clinic attendances very adversely. In fact it was deemed necessary to close one of the Child Welfare Clinics for nine consecutive weeks.

Voluntary Organisations do not provide any Clinics within this County.

(3) Dental Care.

The Dental Surgeons continue to concentrate their activities entirely on school children so that it has been impossible to provide any dental care for expectant mothers, nursing mothers or pre-school children.

(4) Mother and Baby Homes.

No such Homes for mothers and babies exist in this County nor does experience show that the need for such Homes exists in the County of Kincardine.

(5) Nurseries.

Neither day nor residential nurseries have been established in this County. It is unlikely that the need for such Nurseries will ever arise.

(6) Welfare/

(6) Welfare Foods.

During the war, the Government introduced the Welfare Foods Scheme whereby Milk and certain Vitamin Supplements were made available to the "vulnerable groups" of the population, viz:- expectant and nursing mothers and young children. The Welfare Foods Scheme conducted by the Ministry of Food made available to these "vulnerable groups" National Dried Milk, Cod Liver Oil, Orange Juice and Vitamin A. & D. Tablets.

With the end of Food Rationing and the great decrease in the activities of the Ministry of Food, the Government asked the Local Authorities to take over the Welfare Foods Scheme whereby distribution of National Dried Milk, Cod Liver Oil, Orange Juice and Vitamin A. & D. Tablets was to be carried out under the auspices of the Local Authority. This change over took place at the end of June 1954. The following Distribution Centres were set up in the County:-

<u>Distribution Centre</u>	<u>Day</u>	<u>Time.</u>
Stonehaven Central Store	Mondays	2 - 4 p.m.
Stonehaven Child Welfare Clinic	Thursdays	2 - 4 p.m.
Inverbervie Child Welfare Clinic	Tuesdays	2 - 4 p.m.
Inverbervie Nurse's House	Fridays	2 - 4 p.m.
St. Cyrus Nurse's House	Fridays	2 - 4 p.m.
Marykirk Nurse's House	Tuesdays	2 - 4 p.m.
Laurencekirk Child Welfare Clinic	Tuesdays	2 - 4 p.m.
Laurencekirk Child Welfare Clinic	Fridays	2 - 4 p.m.
Fettercairn Nurse's House	Wednesdays	2 - 4 p.m.
Fordoun School, Auchinblae	Mondays to Fridays	School hours
Redmyre School, Fordoun	Mondays to Fridays	School hours
Nurse's House, Newtonhill	Mondays	2 - 4 p.m.
Cove Bay Child Welfare Clinic	Wednesdays	2 - 4 p.m.
Banchory Child Welfare Clinic	Mondays	2 - 4 p.m.
Durris and Maryculter Area	Nurse delivers as required.	

Those entitled to the Welfare Foods can call at these Centres and obtain the supplies to which they are entitled.

Kincardineshire is a rural County and in some instances it is not possible for mothers to uplift the Foods they require. In these instances, the Nurses deliver during the normal course of their rounds, the Welfare Foods to the mothers requiring them.

The Scheme settled down in reasonable time and is now working satisfactorily. Tribute must be paid to Ministry of Food Officials and Staff for the help they so willingly gave prior to and after the taking over of the Welfare Foods Scheme by the Local Authority.

2 MIDWIFERY.

During the year under review, the number of births occurring in the County, including the four Burghs - that is before correction for mother's residence - was 164 - 162 live and 2 still births. The total number of births occurring in institutions including maternity homes was 108 or 60 per cent.

The number of domiciliary births was 56, and, of these 54 were live births and 2 were still births. The following interesting results emerge from an analysis of these births:-

(1) the/

(1) The doctor was engaged and was present at confinement in	22 cases
(2) The doctor was engaged but was not present at confinement in	28 cases
(3) No doctor was engaged: midwife acted alone in	6 cases
Total	56 cases

The number of cases in which medical aid was summoned during the year under Section 14 (1) of the Midwives (Scotland) Act 1951 was as follows:-

(a) for Domiciliary Cases	2
(b) for Institutional Cases	-
Total	2

As far as the administration of analgesia is concerned, all the Local Authority midwives in the County - 15 in number - are qualified to administer gas and air analgesia in accordance with the requirements of the Central Midwives Board for Scotland. Two midwives employed in an institution in the County are also qualified to administer gas and air analgesia. During the year, gas and air analgesia was administered by midwives in domiciliary practice in 7 cases when the doctor was present at delivery, and in 10 cases when no doctor was present.

Midwives in the course of their domiciliary practice administered pethidine in 27 cases. The doctor was present at delivery in 13 cases while in 14 cases no doctor was present.

All the Health Visitor-Nurses used cars provided by the County Council. At 31st December, 1954, 17 cars were in use. One new car had been received at the end of the year and at 31st December the car which it replaced had not been sold.

3. HEALTH VISITING.

The number of visits paid by the Health Visitor-Nurses during the year under review appears in the subjoined table -

Number of Visits paid by Health Visitors during 1954										
Expectant Mothers		Children under 1 year of age.		Children between the ages of 1 & 5		Tuberculous cases		Other cases		Total Visits paid.
First Visits	Total Visits	First Visits	Total Visits	First Visits	Total Visits	First Visits	Total Visits	First Visits	Total Visits	
217	1,109	879	5,985	1,975	7,203	34	96	288	463	14,856

There are no Health Visitor-Nurses employed by any voluntary organisation in the County.

4. HOME NURSING.

The number of cases attended by the Health Visitor-Nurses in their capacity as home nurses was 1,642, of whom 402 were elderly patients. The total number of visits paid to the 1,642 patients was 24,115 of which number 14,054 visits were paid to elderly patients.

In/

In 1953, the total number of cases visited was 1,458 as compared with 1,163 in 1952. 370 of these cases were elderly patients. In visiting these 1,458 cases, the Health Visitor-Nurses paid 24,444 visits. Of these visits 12,408 visits were paid to elderly patients.

No sick nursing arrangements were made by the Local Authority with any voluntary organisation.

5. DOMESTIC HELP SERVICE.

At the end of the year, two Domestic Helps, both part-time, were in the employment of the Council. One was paid on a retaining fee basis. Six other part-time Domestic Helps were employed on a temporary basis during the course of the year.

The provision of temporary Domestic Helps in the rural parts of the County enabled services to be provided which would not otherwise have been possible had the static Domestic Helps, resident in the Burghs, been the only source of Domestic Help available.

The number of cases for whom Domestic Helps were provided was 21. The reasons why help was required in these cases were as follows:-

(1) General Illness	...	...	4
(2) Tuberculosis	...	...	1
(3) Old Age	...	...	11
(4) Home Confinement	...	...	4
(5) Hospital Confinement	...		1
Total			<u>21</u>

The Domestic Help Service in this County is still not as successful as it should be. Despite all efforts made to acquaint the public with the Service, it is not used as advantageously as possible. In addition, recruitment continues to be a very difficult matter.

For the year to 15th May, 1954, the Domestic Help Service cost £413.19.9 while £77.16.10 was the amount of the sum recovered or due to be paid.

6. VACCINATION AND IMMUNISATION.

(a) Vaccination against Smallpox.

The coming into force of the National Health Service (Scotland) Act, 1947 abolished compulsory vaccination against Smallpox. Vaccination is carried out by the family doctors and facilities are offered at every session of each of the five Child Welfare Clinics in the County. During the year under review 289 children were vaccinated. Of these 25 showed no local reaction on vaccination or revaccination. These children were presumed to be naturally immune. Compared with the number for the previous year which was 298, the number of primary vaccinations carried out in 1954 must be regarded as satisfactory when one bears in mind the fact that one of the Child Welfare Clinics in the County was closed for nine weeks.

As far as revaccination is concerned, 100 persons were revaccinated. In only one instance was there no reaction. In 1953, revaccination was carried out on 78 persons.

It is sincerely to be hoped that although vaccination is no longer compulsory, parents will be aware of their responsibility to their children and will have them vaccinated voluntarily. Parents should bear in mind the highly successful results of Diphtheria Immunisation.

(b) Diphtheria Immunisation/

(b) Diphtheria Immunisation.

It is advisable that all children under one year of age should be fully immunised against Diphtheria. Facilities for such immunisation are available at all sessions in all the Child Welfare Clinics. The family doctors can also offer similar facilities to parents who wish to have their children immunised. A maintenance immunisation or "boosting dose" consisting of one single injection should be given a few months prior to the child commencing school and a further "boosting dose" should be given when the child is about 8 years of age.

The prevalence of Poliomyelitis in the County during part of 1954 seriously affected the numbers of children being immunised. In the course of the year 362 children were fully immunised while 60 children received maintenance or "boosting" doses. No intensive Diphtheria Immunisation Campaigns were carried out in the County owing to lack of medical staff.

(c) Whooping Cough.

As in former years parents who wish their children immunised against Whooping Cough may have this carried out at any of the Child Welfare Clinics. In most instances, children who are immunised against Diphtheria are also at the same time immunised against Whooping Cough.

7. PREVENTION OF ILLNESS, CARE AND AFTER-CARE.

(a) Tuberculosis

During the year under review, eighteen cases of tuberculosis, fifteen respiratory and three non-respiratory, were brought to the notice of the Medical Officer of Health. The corresponding figures for the years 1953 and 1952 were twenty-one and nineteen respectively.

The distribution of those cases according to age and sex is shown in the following tables:-

(a) Respiratory Tuberculosis.

	Under 1	1 - 5	5-15	15-25	25-35	35-45	45-55	55-65	65 and upwards	Total
Males	-	-	-	1	2	1	2	1	2	9
Females	-	-	1	-	2	2	-	1	-	6
Total	-	-	1	1	4	3	2	2	2	15

(b) Non-respiratory Tuberculosis.

	Under 1	1 - 5	5-15	15-25	25-35	35-45	45-55	55-65	65 and upwards	Total
Males	-	-	-	1	-	-	-	-	-	1
Females	-	-	2	-	-	-	-	-	-	2
Total	-	-	2	1	-	-	-	-	-	3

At/

At the end of December, 1954, the total number of persons resident in the County who were known to be suffering from tuberculosis was 141. Of this number 110 were cases of respiratory tuberculosis while 31 were cases of non-respiratory tuberculosis. The distribution of all these cases according to age and sex is shown in the following table:-

		Under 1	1-5	5-15	15-25	25-35	35-45	45-55	55-65	65 and upwards	Total
Respiratory	Males	-	-	-	5	16	13	9	8	3	54
	Females	-	-	1	5	26	12	5	5	2	56
Non- Respiratory	Males	-	2	5	2	1	2	1	1	-	14
	Females	-	1	6	1	2	3	3	1	-	17

As already stated, cases of non-respiratory tuberculosis who were known to be alive at 31st December, 1954, numbered 31. Data regarding the location of the disease together with similar data for the three previous years appears in the following table:-

Non-respiratory Tuberculosis - Location.

Year	Glands	Bones and Joints	Spine	Abdomen	Lupus	Other	Total
1951	8	4	2	1	6	4	25
1952	10	4	2	1	6	6	29
1953	11	6	2	1	6	7	33
1954	11	5	2	1	5	7	31

Mortality.

The number of deaths from respiratory and non-respiratory tuberculosis in the years 1951 to 1954 inclusive and the death-rates per 1,000 of population in these years, together with the ages at death in respiratory cases are shown in the following tables:-

Mortality.

	1951	1952	1953	1954
Respiratory	5	-	2	2
Non-respiratory	-	1	-	1
Total	5	1	2	3
Death-rate per 1,000 population (all forms)	.18	.04	.07	.11

Ages/

Ages at Death of Respiratory Cases.

Age Group	1951	1952	1953	1954
Under 5 years	-	-	-	-
5 - 15 years	-	-	-	-
15 - 25 years	-	-	-	-
25 - 35 years	3	-	1	1
35 - 45 years	2	-	1	-
45 - 65 years	-	-	-	1
Over 65 years	-	-	-	-
Total number of deaths	5	-	2	2
Death-rate per 1,000 population	.18	-	.07	.07

Institutional Treatment.

The north-Eastern Regional Hospital Board is responsible for providing institutional treatment for persons suffering from tuberculosis. The following table shows the number of cases admitted to Tuberculosis Institutions during 1954 and the three preceding years:-

Admissions to Institutions.

Year	1951	1952	1953	1954
Respiratory	17	15	13	16
Non-respiratory	3	4	7	3
Total	20	19	20	19

Domiciliary Treatment.

There are seven shelters available for patients who have been treated in institutions. Patients using these shelters are enabled to continue open-air treatment at home.

Whenever the Medical Officer of Health is aware that a family, one of whose members is suffering from "open" tuberculosis, is living in unsatisfactory housing conditions, he makes application to the appropriate Local Authority asking that the family concerned be granted the tenancy of a Council house. This action is of vital importance in helping to stop the spread of the disease to other members of the family.

For many years the County Council have provided extra nourishment to selected cases undergoing domiciliary treatment. Before granting extra nourishment the Medical Officer of Health investigates the cases and satisfies himself that there is real need for it, having regard to the total income of the home.

The National Assistance Board also make available special allowances to Tuberculous patients whose needs require them.

Mass/

Mass Radiography.

During the last two weeks of May and first week of June a Mass Radiography Survey was carried out in the County.

A Mass Radiography Unit visited each of the four Burghs in the County and in each case special sessions were held for school leavers, teaching staff, Local Authorities' Staffs and trade employees. In addition there were sessions which were open to the public. The following information gives some details regarding the Survey.

A total of 2,538 persons (1,118 males and 1,420 females) were examined. These were sub-divided as follows:-

Stonehaven Survey -

School Children	...	...	...	146
Public Sessions	...	...	...	637
Others	...	...	...	431
Total				1,214

Laurencekirk Survey -

School Children	...	...	...	97
Public Sessions	...	...	...	178
Others	...	...	...	95
Total				370

Inverbervie Survey -

School Children	...	...	...	34
Public Sessions	...	...	...	292
Others	...	...	...	101
Total				427

Banchory Survey -

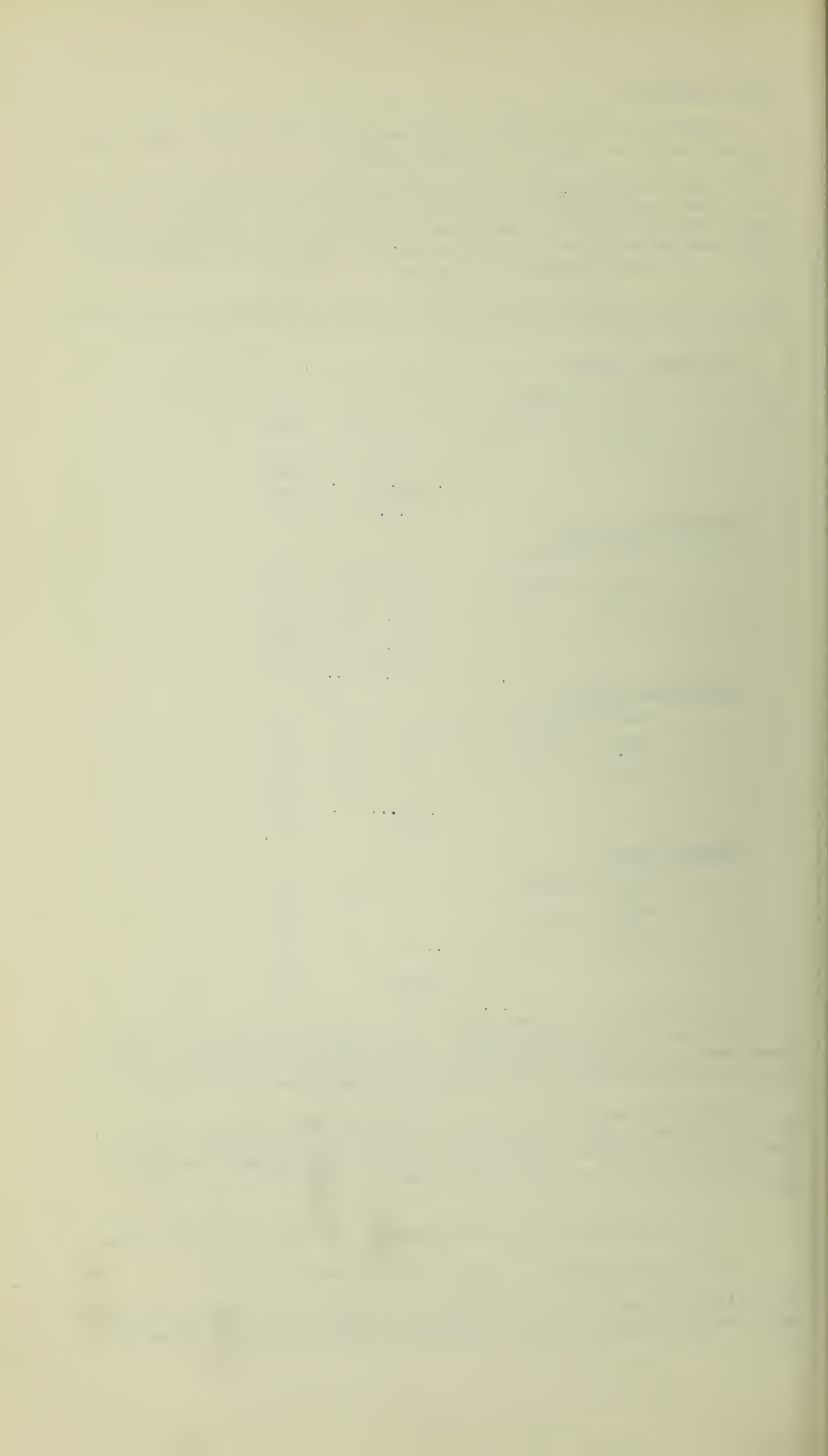
School Children	...	...	...	124
Public Sessions	...	...	...	306
Others	...	...	...	97
Total				527

It is gratifying to report that only 3 cases of active tuberculosis were found as a result of the Survey. It is also gratifying to be able to state that over 99.5 per cent of the school leavers volunteered for Mass Radiography Examination and every one of them was found to be normal.

This Survey was the first of its kind which has taken place in Kincardineshire, indeed it was one of the first of rural surveys to have taken place in Scotland. Experience from this Survey has shown that in any future Survey in this County two changes in arrangements should be made, viz:-

- (1) An increased amount of time should be allocated to Public Sessions.
- (2) If at all possible, evening sessions should be held.

The latter is a matter for the North-Eastern Regional Hospital Board as it would probably involve the Mass Radiography Staff having to stay overnight in/



in some of the Burghs.

B.C.G. Vaccination.

The arrangements for the carrying out of B.C.G. Vaccination are in the hands of the Chest Physician, City Hospital, Aberdeen.

(b) EPILEPTICS AND SPASTICS.

Patients suffering from Epilepsy or Cerebral Palsy are cared for by their own doctors who refer suitable cases to hospital where necessary. No such cases have been referred to the Medical Officer of Health and consequently definite information about the incidence of these diseases is not available.

The County Council have not, so far, provided special facilities under the local health services for persons suffering from these handicaps. On the other hand, cases of school age requiring special educational facilities would be dealt with by their admission to a suitable Special School.

(c) CONVALESCENT HOME PROVISION.

Experience so far has not warranted the local health authority setting up a Convalescent Home. It is not expected that the provision of such a Home will be justified in the reasonably near future. No arrangements are made with voluntary organisations who provide convalescent home accommodation.

(d) CHIROPODY SERVICE.

The local health authority has not, so far, provided a Chiropody Service nor does the need for the establishment of such a Service appear to be justified meantime. The Kincardineshire Branch of the British Red Cross Society meet the Chiropodists' fees in necessitous cases. Very few such cases arose during the year.

8. CONTROL OF INFECTIOUS DISEASES.

The excellent laboratory facilities provided by the Regional Hospital Board at the Regional Bacteriological Laboratory, Urquhart Road, Aberdeen continue to assist in and to confirm the diagnosis of infectious diseases occurring in this County.

The infectious Diseases Wards of the City Hospital, Aberdeen, admit cases suffering from infectious diseases who require institutional treatment.

During the year under review there was a sharp rise in the incidence of notifiable infectious diseases, the number of cases notified being 114. In 1953, only 64 cases were notified. The numbers notified in the three previous years were - in 1952 - 100; in 1951 - 130; and in 1950 - 103. The following table shows the numbers of the various infectious diseases notified during the years 1954 and 1953:-

Disease	1954	1953
Cerebro-Spinal Fever	1	1
Dysentery	2	-
Erysipelas	5	1
Weil's Disease	-	1
Influenza Pneumonia	1	2
Primary Pneumonia	30	19
Polio-myelitis	9	1
Scarlet Fever	27	24
Whooping Cough	39	12
Undulant Fever	-	3
Totals	114	64

I submit the following notes in connection with the commoner infectious diseases:-

Scarlet Fever -

During the year twenty-seven cases were notified as compared with 24 in 1953 and 29 in 1952. The disease continued to be very mild in character while the distribution of the disease was general throughout the County. Of the twenty-seven cases, 18 were removed to hospital, the remaining 9 being treated at home.

Diphtheria -

I have pleasure in reporting that no confirmed case of Diphtheria has occurred in the County of Kincardine during the past five years.

The arrangements for the artificial immunisation of children were similar to those in 1953. During 1954, however, an outbreak of Poliomyelitis occurred in the County and on this account no immunisation against Diphtheria was carried out for several months.

Puerperal Fever and Puerperal Pyrexia -

It is gratifying to report that for the second successive year no cases of these conditions were notified.

Cerebro-Spinal Fever -

One notification of this disease was received. The patient, a child under 1 year of age, was removed to hospital where recovery took place.

Erysipelas -

Five cases were notified. All were treated at home. In 1953 and 1952, one case and three cases respectively were notified.

Acute Infective Jaundice -

No notifications of this disease were received. In the preceding year, one case was notified.

Pneumonia (Acute Primary and Acute Influenzal) -

Thirty cases of Acute Primary Pneumonia were notified as compared with nineteen in 1953. Of the thirty cases notified, twelve were removed to hospital. Only one case of Acute Influenzal Pneumonia was notified.

Smallpox -

No cases occurred.

Encephalitis Lethargica -

No notifications were received.

Ophthalmia Neonatorum -

Once again no cases of this disease were brought to the notice of the Medical Officer of Health. This is a preventable disease and in the last 50 years its incidence has decreased very markedly.

Dysentery -

During the year under review, two cases of this disease were notified. One of the cases was admitted to hospital for treatment.

Typhoid/



Typhoid and Para-typhoid Fevers -

No cases were notified to the Medical Officer of Health.

Undulant Fever -

No cases occurred. In 1953, three cases were notified.

Whooping Cough -

There was an increase in the incidence of this disease during the year under review. Thirty-nine cases were notified as compared with 12 in 1953 and 50 in 1952. Two of the 39 cases were removed to hospital, the remaining 37 being treated at home. The geographical distribution of the disease was mainly confined to the coastal areas of the County. The age distribution of the cases was very similar to that prevailing in the preceding year. Two of the children affected were under one year of age. Twenty-two cases occurred in the age period one to five years while fifteen cases occurred in children between the ages of five and fifteen years.

Because of the severe complications that often ensue, whooping cough must be regarded as an exceedingly grave disease. Every effort is made to advocate that immunisation against this disease be carried out within a few months of birth.

Acute Poliomyelitis -

This disease is caused by a virus infection. The popular name for the disease - "Infantile Paralysis" - is an unfortunate term because age-groups older than infants are frequently affected and only in a proportion of cases does paralysis occur.

During the years 1952, 1953 and 1954, the incidence of cases of the disease in Scotland and in Kincardineshire was as follows:-

Number of Cases.

Year	Scotland	Kincardineshire
1952	217	1
1953	368	1
1954	502	9

In previous years, this disease was sporadic in its occurrence in this County, as indeed, it had been in the whole of Scotland.

During the latter part of June and early in July, three cases - all females - occurred in the Upper Deeside area of the County. A further case - a schoolgirl - occurred early in August in another part of the County. This child arrived on holiday from Paisley only one or two days before she developed the disease. Presumably she was already infected when she arrived in this County. About one month later an outbreak occurred in Laurencekirk and the immediately surrounding area. Four cases occurred - all school children.

The degree of paralysis which accompanied the disease varied in its severity. In one case no paralysis at all occurred while in another the paralysis was most severe and extensive in its character. The other cases showed varying degrees of paralysis.

During/



During the year the Ministry of Health and the Department of Health for Scotland issued jointly a Medical Memorandum for the use of Medical Officers of Health regarding Poliomyelitis and the preventive measures considered advisable. The preventive measures which were adopted in this County followed very closely the advice given to Medical Officers of Health in this Memorandum.

Active precautions which were taken included the following measures:-

- (1) The closure of certain schools in the County.
- (2) All pupils ordinarily resident in the infected area were excluded from any other school for a prescribed period and until it was considered safe for them to resume attendance at school.
- (3) All mass assemblies of pupils in all schools in the County were discontinued temporarily.
- (4) Immunisation against Diphtheria and Whooping Cough in the infected area was discontinued temporarily.
- (5) The sessions of the Laurencekirk Child Welfare Clinic were stopped for nine consecutive weeks.
- (6) In co-operation with the hospitals concerned, arrangements were made whereby no cases of enlarged tonsils and adenoids were operated on until it was considered safe to do so.
- (7) All Youth Organisations in the infected area willingly co-operated in temporarily ceasing their activities.
- (8) The owner of a local Picture House in the area concerned was most co-operative in accepting and carrying out the advice given him to refuse admission to the Picture House all children who were unaccompanied by their parents.
- (9) On receiving confirmation of each case, the Medical Officer of Health carried out full investigation, and in visiting the household, he advised its members as to the precautions which they had to adopt.

A further isolated case of Poliomyelitis occurred in the north-end of the County towards the end of the year. This case, a pre-school child, had a moderate degree of paralysis.

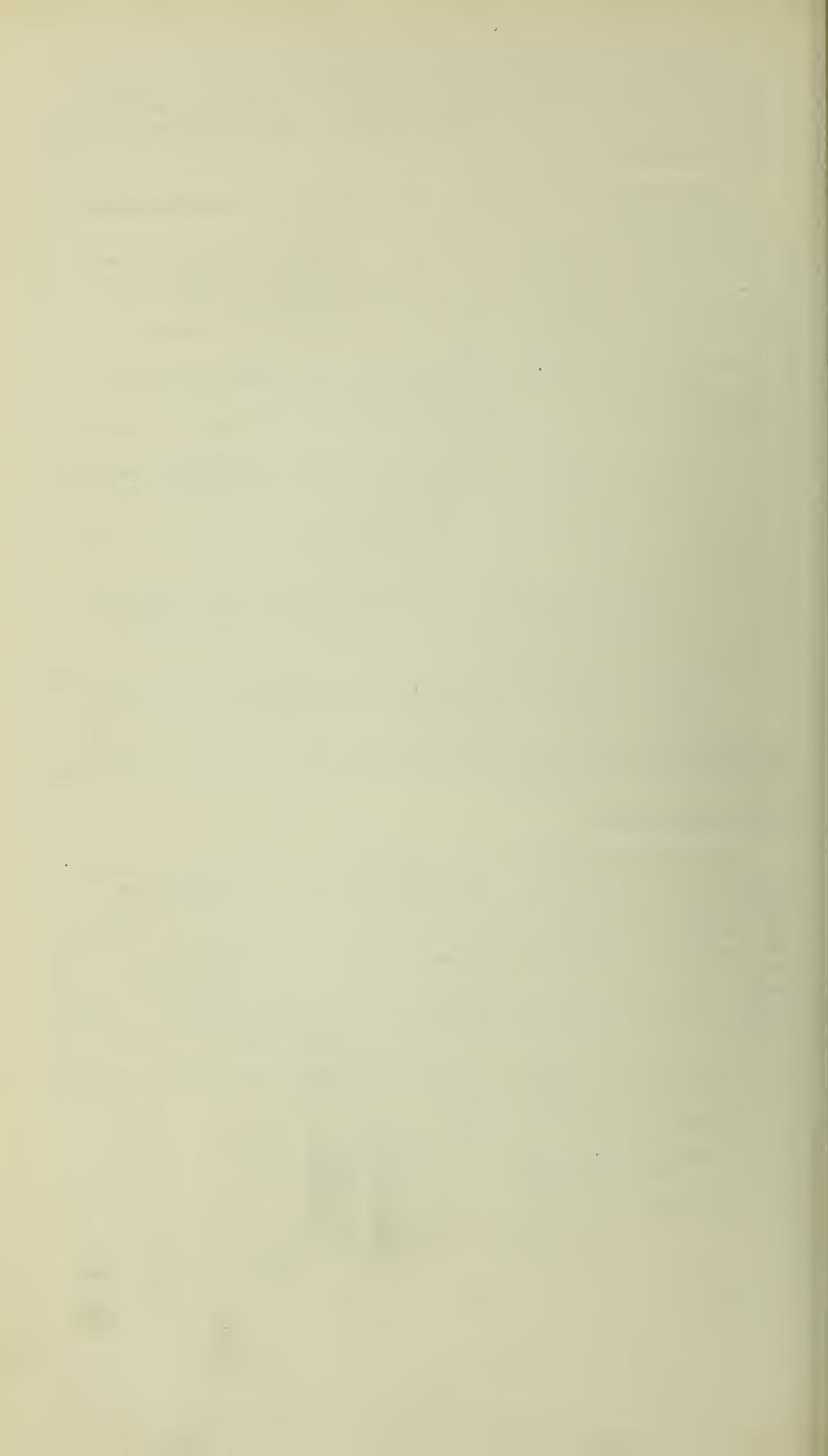
9. MENTAL HEALTH SERVICE.

Local Health Authorities have certain duties placed on them under the National Health Service Act. These duties include the visitation and supervision, on behalf of the Regional Hospital Board, of certified lunatics placed under guardianship, and the making of arrangements for and visitation and supervision of mental defectives placed under guardianship. These duties are carried out by the Medical Officer of Health who is also Welfare Officer and in this duties he has the services of the Assistant Welfare Officer. Once again, tribute must be paid to Col. Moore Taylor, Medical Officer for Mental Health employed by the Regional Hospital Board. Col. Taylor is ever willing to give his specialist advice in all cases of mental illness or defect.

During the year the number of mental cases dealt with were as follows:-

(1) Number of lunatics certified	...	...	...	...	1
(2) Number of mental defectives certified	...	...	...	...	2
(3) Number of mental defectives (ineducable)					
under guardianship at the end of the year	...	...	...	...	5
(4) Number of mental defectives (educable)					
under guardianship at the end of the year	...	...	...	...	6
				Total	14

No/



No voluntary organisations specialising in mental health exist in the County.

10. NURSERIES AND CHILD MINDERS' REGULATION ACT.

The provisions of this Act did not have to be brought into operation during the year under review.

B. SCHOOL HEALTH SERVICE.

The Annual Report on the School Health Service appears as an Appendix to this Report. The period covered in this Report is from 1st August, 1953 to 31st July, 1954.

C. PORT HEALTH ADMINISTRATION.

This is not applicable in this County.

D. FOOD SUPPLY.

This subject will be dealt with by the appropriate Sanitary Inspectors in their Annual Reports.

Nutrition.

Special attention was paid to the nutrition of the children attending the Child Welfare Clinics and of children of school age.

E. MISCELLANEOUS.

1. National Assistance Act, 1948.

The Old People's Home which was opened in Stonehaven in July 1952 has accommodation for 20 persons. The number of residents at the end of the year was 14 - 4 males and 10 females. Each resident has available the services of the doctor of his or her choice. This Home has no nursing facilities except, of course, for temporary illness. If one of the old persons becomes ill accommodation has to be obtained in one of the hospitals under the control of the North-Eastern Regional Hospital Board.

With regard to Section 29 of the National Assistance Act, the services of two voluntary organisations are utilised in connection with blind persons in this County.

A voluntary organisation in Aberdeen makes available its services for the improvement and tuition of the Deaf and Dumb.

There are no registered homes for old people in this County.

As in the previous year, the powers given under Section 47 of the National Assistance Act for the compulsory removal of any person to an Institution or Home did not have to be exercised.

There were no cases in which property had to be taken under the care of the County Council,

In the year under review, one burial was carried out under Section 50 of the Act.

2. Nursing Homes Registration (Scotland) Act.

No registered Nursing Homes exist in this County.

3. Health Education.

The County Council continue to receive the willing services of the Scottish/



Scottish Council for Health Education. A Medical Officer from this Council visited schools in the County to lecture to school children on health matters. Experience has shown that the attendance of the public at evening sessions does not justify these being held.

The Health Visitor-Nurses, in the course of their duties not only at Clinics but also in the homes of the parents avail themselves of the opportunities to give advice on the methods to be adopted to prevent not only disease but also accidents in the home.

F. GENERAL SANITATION.

This subject is dealt with by the appropriate Sanitary Inspectors in their Annual Reports.

APPENDIX/



COUNTY OF KINCARDINE - SCHOOL HEALTH SERVICE.

Annual Report on the Medical Inspection,
Supervision and Treatment of School Children
for the year ended 31st July, 1954.



S T A F F.

Medical Officer of Health and School Medical Officer.

Alexander Henderson, M.B., Ch.B., D.P.H.

Relief Medical Officer

Harry J. Rae, M.C., M.A., M.B., Ch.B., D.P.H., Q.P.

Dental Surgeons

Chief Dental Officer

Charles P. Moore, L.D.S.

Part-time Dental Officer

Henry J. Main, L.D.S.

Part-time Ophthalmic Surgeon

Charles Cockburn, D.O.M.S., F.R.C.S.E.

(Resigned on 31st December, 1953)

Fiona Melville Bennett, M.B., Ch.B., D.O.

(Commenced duty on 1st January, 1954)

Assistant Medical Officer for Diphtheria Immunisation

Mary E. Jappy, M.B., Ch.B., D.P.H.

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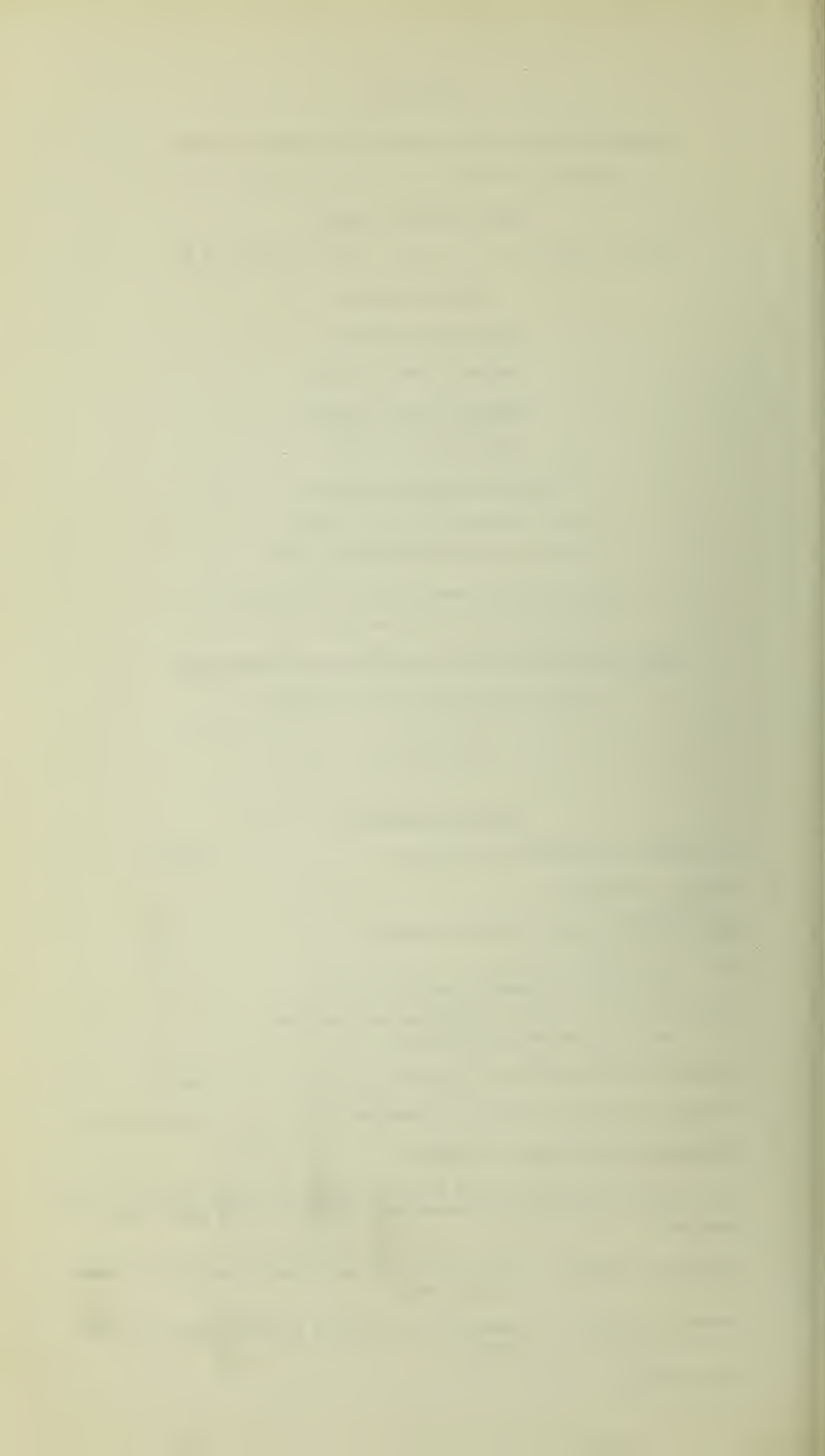
GENERAL STATISTICS.

1.	Population (estimated) of the area	27,743
2.	Number of Schools:-	
	(a) Primary) Under Education Committee	39
	(b) Secondary)	5
	(c) (i) Special Schools	-
	(ii) Special Classes in ordinary schools	-
	(d) In receipt of grant from Education Committee and under medical inspection	-
	Number of children on the registers	4,733
	Number of children in average attendance	4,454 (94.1%)
3.	<u>Sanitary Condition etc. of Schools</u>	

The County Architect and Planning Officer has supplied, as he did last year, the following information in respect of the year under review:-

Bervie J.S. School.	Circulating pump installed to improve the heating to cold wing.
Gourdon P. School.	Installation of glazed fireclay slabs to boys' urinal.

Fettercairn/



Fettercairn P. School.	Heating system altered to improve the heating of infant room.
Redmyre P. School.	Fence erected at roadway to enclose playground.
Fordoun P. School.	Four additional lavatory basins installed in cloakroom.
Rickarton P. School.	Electricity installed.
Mackie Academy.	Work proceeding on extension to urinals. Electric hand drier installed in boys' cloakroom.
Inchmarlo P. School.	Additional water supply by pump and modernisation of W.C.s.
Strachan P. School.	Electricity installed.
Banchory-Devenick P. School.	Electricity installed.
Maryculter East P. School.	Electricity installed.
Cove P. School.	Improved urinal with flushing cistern. Conversion of old schoolhouse to form infant classroom, etc., and two additional lavatory basins installed in a cloakroom.
Portlethen J.S. School.	W.C. installed in primary school, for use of girls.

Tarmacadam surfaces have been laid to the under-mentioned schools:-

Inchmarlo P. School.	Complete playground.
Cove P. School.	Part resurfaced.
Johnshaven P. School.	Boys' playground.
St.Cyrus P. School.	Assembly area of playground.
Fettercairn P. School.	Boys' playground.
Dunnottar P. School.	Resurfacing boys' playground.
Mackie Academy.	Primary playground.
Laurencekirk J.S. School.	Area between gymnasium and school extension.

Electricity has been installed to school meals scullery at Cairnhill P. School and electric hot cupboard and water heater installed.

4. Organisation and Administration.

A. Medical Inspection:-

In addition to medical inspection in connection with the four usual age-groups, viz:- entrants, 9 year-olds, 13 year-olds and 16 year-olds, an examination, so far as visual acuity and hearing were concerned, of all children born in the year 1946 was carried out. In this special age-group 462 children (237 boys and 225 girls) were examined. With regard to visual acuity 137 children (65 boys and 72 girls) had "fair" vision, while 10 children (7 boys and 3 girls) had "bad" vision. As for hearing, 19 children (12 boys and 7 girls) were classified as defective, 12 boys and 6 girls being in Grade I while one girl was in Grade IIa.

There has never been a minor ailments clinic in the County of Kincardine and it is not meantime proposed to establish such a clinic in any/



any of the Burghs. Children who are found to be physically defective are referred to their own doctors for advice and treatment.

B. System and extent of dental inspection and treatment.

As stated on page 1 of this Report, the Dental Staff consists of a Chief Dental Officer and one part-time Dental Officer. The latter devotes his services to the three schools in Stonehaven where approximately 25% of the scholars in this County attend.

During the year under review, premises are being built in Banchory which will supply the needs for a Child Welfare Clinic and a Dental Clinic. It is anticipated that this new building will be completed soon.

C. School nursing and the arrangements for "following up".

The arrangements made by the County Council to operate as from 5th July, 1948 continued to function satisfactorily. As stated in previous reports, the County Council are now the direct employers of the Health Visitor-Nurses and the transition of their service from the voluntary organisation to local authority control was effected in a most harmonious manner. This was largely due to the broad and generous outlook taken by the County Nursing Federation.

During the year under review the Health Visitor-Nurses acting in their capacity as School Nurses visited 462 children in their homes and in so doing paid 1,167 visits.

D. Co-ordination with the public health service and with other departments of the authority which render services to children.

The Medical Officer of Health is the Executive Officer for the School Health Services. The co-ordination of the health services in Kincardineshire in regard to pre-school and school children is very intimate.

E. Co-operation with voluntary bodies and other outside agencies.

As stated in previous Reports, a close liaison was maintained with the voluntary hospitals in Aberdeen and with the Cripples Welfare Association for the North-East of Scotland. In 1948, these were transferred to the jurisdiction of the North-Eastern Regional Hospital Board but the same close co-operation in relation to handicapped children has been maintained.

F. Co-operation with teachers and parents with special reference to the attendance of parents at inspections.

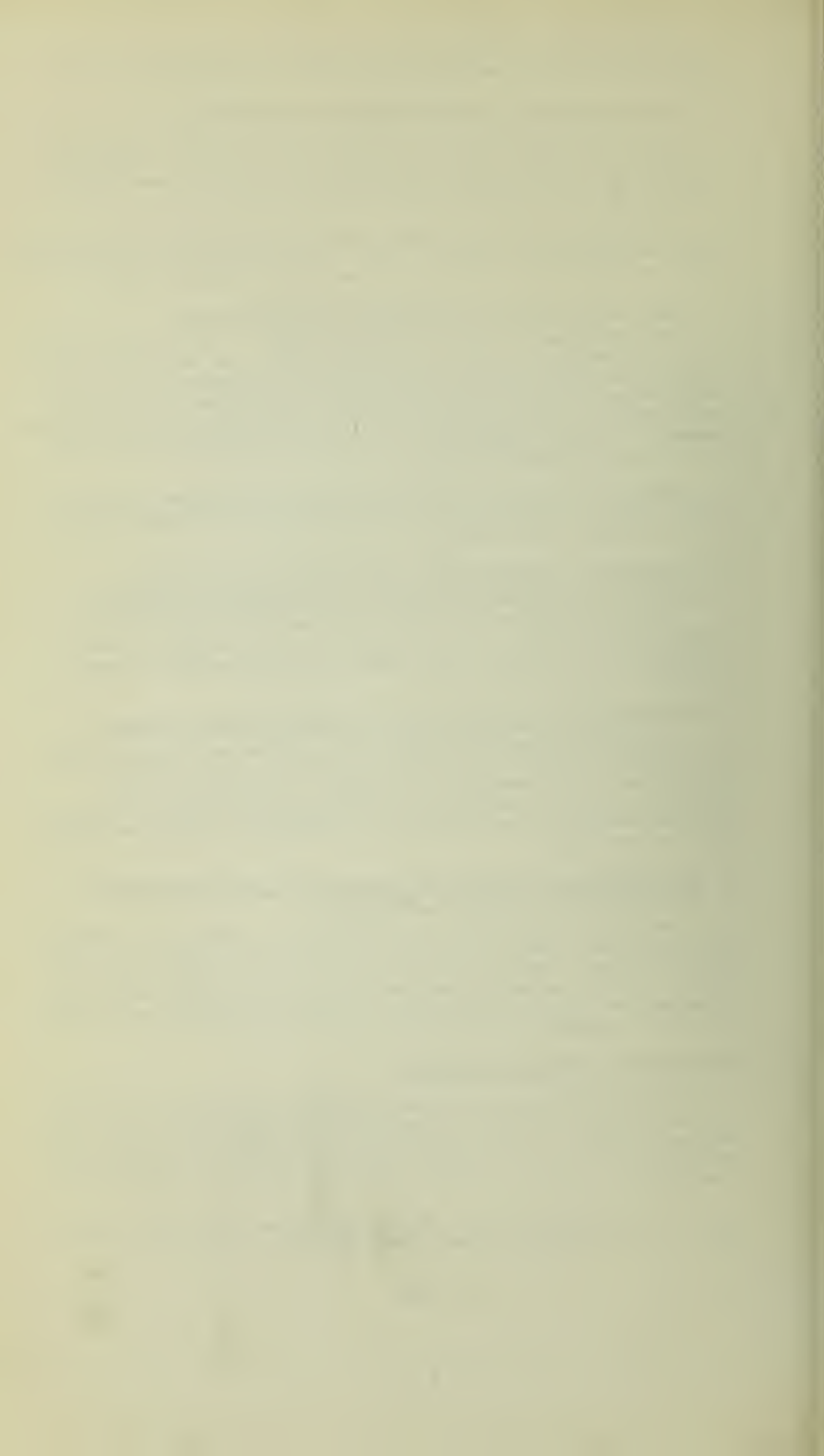
Parents are invited to be present when their children are examined. The parents are informed of the date and hour of the visit of the School Medical Officer. Whilst many of the parents in the Burghs avail themselves of this opportunity, unfortunately few in the rural areas do so; transport and domestic duties make it difficult for parents in the rural areas to be present.

5. The Findings of Medical Inspection.

The number of children who were examined systematically was 1,379 whilst 462 children born in the year 1946 were examined for visual acuity and hearing only. To these therefall to be added 500 children who were re-examined and 123 cases who were submitted by teachers and parents for examination.

The following table shows the average heights and weights of those boys and girls who were measured and weighed:-

(a) BOYS/



(a) BOYS.

<u>No. of Children</u>	<u>Average Age in years</u>	<u>Average Height in inches</u>	<u>Average Weight in lbs.</u>
22	4 9/12	42.4	39.7
200	5 6/12	44.2	45.5
49	6 2/12	45.6	46.3
44	8 10/12	51.7	60.6
157	9 5/12	52.5	66.5
5	10 1/12	53.3	72.6
21	12 10/12	58.8	89.0
176	13 6/12	61.3	92.4
2	15 9/12	66.0	143.5
20	16 5/12	70.0	143.4

(b) GIRLS.

<u>No. of Children</u>	<u>Average Age in years</u>	<u>Average Height in inches</u>	<u>Average Weight in lbs.</u>
23	4 10/12	41.3	39.0
178	5 6/12	43.7	41.8
47	6 4/12	44.9	45.8
38	8 10/12	51.5	59.9
157	9 5/12	52.4	63.2
5	10 1/12	52.2	62.5
23	12 10/12	60.5	93.6
177	13 6/12	61.6	104.3
6	15 10/12	63.8	122.2
29	16 5/12	64.9	127.2

The findings of systematic medical examination were as follows:-

	<u>Number Examined</u>	<u>Number Defective</u>	<u>Percentage Defective.</u>
1. <u>Clothing</u> unsatisfactory	1,579	8	.53
2. <u>Footgear</u> unsatisfactory	"	10	.72
3. <u>Cleanliness:-</u>			
(a) Head (1) Dirty	"	2	.14
(2) Nits	"	7	.50
(3) Verminous	"	-	-
(b) Body (1) Dirty	"	3	.21
(2) Nits	"	-	-
(3) Verminous	"	-	-
4. <u>Skin:-</u>			
(a) Head - Ringworm	"	-	-
Impetigo	"	1	.07
Other Diseases	"	5	.56
(b) Body - Ringworm	"	-	-
Impetigo	"	1	.07
Scabies	"	-	-
Other Diseases	"	15	1.08
5. <u>Nutritional State:-</u>			
Slightly defective	"	133	9.64
Bad	"	1	.07
6. <u>Mouth and Teeth unhealthy</u>	"	40	2.90
7. <u>Naso-pharynx-/</u>			



	<u>Number Examined</u>	<u>Number Defective</u>	<u>Percentage Defective.</u>
7. <u>Naso-pharynx:-</u>			
(a) Nose (1) Obstruction requiring observation	1,379	30	2.17
(2) Obstruction requiring treatment	"	1	.07
(3) Other conditions	"	4	.29
(b) Throat (1) Tonsils requiring observation	"	140	10.15
(2) Tonsils requiring treatment	"	20	1.45
(c) Glands (1) Requiring observation	"	92	6.67
(2) Requiring treatment	"	-	-
8. <u>Eyes:-</u>			
(a) External Diseases -			
Blepharitis	"	12	.87
Corneal opacities	"	-	-
Strabismus	"	13	.94
Conjunctivitis	"	3	.21
Other Diseases	"	3	.21
(b) Visual Acuity with/without glasses	860	169	19.65
Recommended for refraction	1,379	47	3.40
Fair vision	860	169	19.65
Bad vision	"	43	5.00
9. <u>Ears:-</u>			
(a) Diseases - Otorrhoea	1,379	4	.29
Other Diseases	"	30	2.17
(b) Defective hearing - Grade 1	"	5	.36
" 11a	"	4	.29
" 11b	"	-	-
" 111	"	-	-
10. <u>Speech - Defective Articulation</u>	"	3	.21
Stammering	"	-	-
11. <u>Mental and Nervous Conditions:-</u>			
(a) Backward	"	6	.43
(b) Dull	"	1	.07
(c) Mentally deficient (Educable)	"	-	-
(d) Mentally deficient (Ineducable)	"	-	-
(e) Highly nervous or unstable	"	-	-
(f) Difficult behaviour	"	-	-
12. <u>Circulatory System:-</u>			
(a) Organic Heart Disease -			
(1) Congenital	"	-	-
(2) Acquired	"	7	.50
(b) Functional conditions	"	7	.50
13. <u>Lungs:-</u>			
Chronic bronchitis	"	7	.50
Suspected tuberculosis	"	-	-
Other diseases	"	26	1.88
14. <u>Deformities:-</u>			
(a) Congenital	"	6	.43
(b) Acquired (Infantile Paralysis)	"	1	.07
(c) Acquired/			



	<u>Number Examined</u>	<u>Number Defective</u>	<u>Percentage Defective.</u>
14. <u>Deformities (Contd.)</u>			
(c) Acquired (Rickets)	1,379	-	-
(d) Acquired (Other causes)	"	3	.21
15. <u>Infectious Diseases</u>	"	-	-
16. <u>Other Diseases or Defects</u>	"	12	.87
17. <u>Classification:-</u>			
Group 11a	"	167	12.17
Group 11b	"	38	2.75
Group 11c	"	2	.14
Group 111	"	138	10.00
Group 1Va	"	63	4.56
Group 1Vb	"	12	.87
Number notified to parents as suffering from defects	"	213	15.44

STATISTICAL TABLES -

TABLE 1.

Total number of children examined at:-

	<u>Systematic Examinations</u>	<u>Other Systematic Examinations</u>
A. <u>Systematic Examinations.</u>		
Ordinary & Secondary Schools		
} Entrants	519	-
} Second Age Group	406	-
} Third Age Group	397	-
} Fourth Age Group	57	-
Total	<u>1,379</u>	<u>-</u>
B. <u>Other Examinations.</u>		
Special Cases	123	
Re-inspections by Medical Officers	500	
Total	<u>623</u>	

Number of children inspected at systematic examinations, who were notified to parents as requiring treatment (excluding uncleanliness and dental caries).

Entrants	79
Second Age Group	59
Third Age Group	60
Fourth Age Group	15
Total	<u>213</u>



TABLE 11 (Contd.)

Nature of Defect	Total Examined All Ages 1,379	Enfrants			Second Age Group			Third Age Group			Fourth Age Group			All Ages							
		Boys 271	%	Girls 248	%	Boys 206	%	Girls 200	%	Boys 197	%	Girls 200	%	Boys 22	%	Girls 35	%	Boys 696	%	Girls 683	%
7. Naso-pharynx -																					
(a) Nose -																					
(1) Obstruction requiring observation	"	11	4.05	11	4.43	2	.97	2	1.0	3	1.52	1	.50	-	-	-	-	16	2.29	14	2.05
(2) Obstruction requiring treatment	"	-	-	1	.40	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	.14
(3) Other conditions	"	1	.36	3	1.20	-	-	-	-	-	-	-	-	-	-	-	-	1	.14	3	.43
(b) Throat -																					
(1) Tonsils requiring observation	"	40	14.76	46	18.54	16	7.76	16	8.0	11	5.58	10	5.0	-	-	1	2.85	67	9.60	73	10.69
(2) Tonsils requiring treatment	"	1	.36	8	3.22	2	.97	3	1.5	3	1.52	3	1.5	-	-	-	-	6	.86	14	2.05
(c) Glands-																					
(1) Requiring observation	"	21	7.74	35	14.11	14	6.79	8	4.0	6	3.04	8	4.0	-	-	-	-	41	5.89	51	7.45
(2) Requiring treatment	"	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
8. Eyes -																					
(a) External Diseases:																					
Blepharitis	"	1	.36	2	.80	3	1.45	3	1.50	2	1.01	1	.50	-	-	-	-	6	.86	6	.87
Corneal Opacities	"	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Strabismus	"	5	1.84	3	1.20	3	1.45	-	-	1	.50	1	.50	-	-	-	-	9	1.29	4	.58
Conjunctivitis	"	-	-	-	-	-	-	-	-	2	1.01	1	.50	-	-	-	-	2	.28	1	.14
Other Diseases	"	1	.36	-	-	1	.48	-	-	1	.50	-	-	-	-	-	-	3	.43	-	-
(b) /																					



TABLE 11 (Contd.)

Nature of Defect	Total Examined All Ages 1,379	Entrants			Second Age Group			Third Age Group			Fourth Age Group			All Ages					
		Boys 271	%	Girls 248	%	Boys 206	%	Girls 200	%	Boys 197	%	Girls 200	%	Boys 22	%	Girls 35	%	Boys 696	%	Girls 683	%
8. (b) Visual Acuity - With/without glasses Recommended for refraction Fair vision Bad vision	860 1,379 860 "	- 2 - -	- .72 - -	- 2 - -	- .80 - -	47 4 47 4	22.81 1.94 22.81 1.94	35 6 35 6	17.50 3.0 17.50 3.0	33 8 33 8	16.7 4.06 16.7 4.06	2 3 2 3	9.09 13.63 9.09 13.63	9 7 9 7	25.71 20.0 25.71 20.0	82 17 82 15	11.78 2.44 11.78 2.15	87 30 87 28	12.73 4.36 12.73 4.09
9. Ears - (a) Diseases: Otorrhoea Other Diseases (b) Defective hearing Grade 1 Grade 11a Grade 11b Grade 111	1,379 " " " "	2 6 1 - - -	.71 2.21 .36 - - -	1 4 - 1 - -	.40 1.61 - .40 - -	- 6 1 1 - -	- 2.91 .48 .48 - -	1 5 2 2 - -	.50 2.50 1.00 1.00 - -	- 7 - - - -	- 3.55 - - - -	- - - - - -	- - - - - -	- - - - - -	- - - - - -	2 19 2 1 - -	.28 2.71 .28 .14 - -	2 11 3 3 - -	.29 1.61 .43 .43 - -
10. Speech - Defective articulation Stammering	" "	3 -	1.10 -	- -	- -	- -	- -	- -	- -	- -	- -	- -	- -	- -	- -	3 -	.43 -	- -	- -
11. Mental and Nervous conditions - (a) Backward (b) Dull (c) Mentally Deficient (Educable) (d) Mentally Deficient (Ineducable) (e) Highly nervous or unstable (f) Difficult behaviour	" " " " " "	1 - - - -	.36 - - - -	- - - - -	- - - - -	3 - - - -	1.45 - - - -	1 - - - -	.50 - - - -	1 1 - -	.50 .50 - -	- - - -	- - - -	- - - -	- - - -	5 1 - -	.71 .14 - -	1 - - -	.14 - - -
12. /		-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-

TABLE 111.

SYSTEMATIC MEDICAL EXAMINATIONS.

Classification	Entrants 519		Second Age Group 406		Third Age Group 397		Fourth Age Group 57		Total - All Ages 1,379	
	Number	Percentage	Number	Percentage	Number	Percentage	Number	Percentage	Number	Percentage
1. Children free from defects	405	78.03	263	64.78	260	65.49	31	54.39	959	69.55
11. Children (otherwise free from defects) who suffer from -										
(a) Defective vision (not more than 6/12 in the better eye) with or without glasses	-	-	80	19.71	76	19.15	11	19.29	167	12.12
(b) Oral sepsis, etc.	35	6.75	2	.49	1	.25	-	-	38	2.75
(c) Both (a) and (b)	-	-	2	.49	-	-	-	-	2	.14
Total	35	6.75	84	20.69	77	19.40	11	19.29	207	15.01
111. Children suffering from ailments (other than those mentioned in 11) from which complete recovery is anticipated within a few weeks	56	10.78	43	10.59	34	8.56	5	8.77	138	10.01
1V. Children with defects less remedial than in 11 or 111.										
(a) where complete cure is considered possible	18	3.47	11	2.71	24	6.05	10	17.55	63	4.57
(b) where improvement only is considered possible	5	.97	5	1.23	2	.50	-	-	12	.86
Total	23	4.44	16	3.94	26	6.55	10	17.55	75	5.43
Total number of children examined	519	100	406	100	397	100	57	100	1,379	100

TABLE 1V.

Return of all Exceptional Children of School Age in the County.

Disability	At ordinary Schools	At Special Schools or Classes	At no School or Institution	Total
1. Blind	-	1	-	1
2. Partially sighted -				
a) Refractive errors in which the curriculum of an ordinary school would adversely affect the eye condition	1	-	-	1
b) Other conditions of the eye, e.g. cataract, ulceration, etc., which render the child unable to read ordinary school books or to see well enough to be taught at an ordinary school	-	-	-	-
3. Deaf - Grade 1	23	-	-	23
Grade 11a	5	-	-	5
Grade 11b	-	-	-	-
Grade 111	-	4	-	4
4. Defective Speech -				
(a) Defects of articulation requiring special educational measures	2	-	-	2
(b) Stammering requiring special educational measures	2	-	-	2
5. Mentally defective (children between 5 and 16 years) -				
(a) Educable	2	4	2	8
(b) Ineducable	-	1	4	5
6. Epilepsy -				
(a) Mild and occasional	2	-	-	2
(b) Severe (suitable for care in a residential school)	-	-	-	-
7. Physically defective (children between 5 and 16 years) -				
(a) Non-pulmonary tuberculosis (excluding cervical glands)	-	-	-	-
(b) General orthopaedic conditions	11	-	-	11
(c) Organic heart disease	7	-	-	7
(d) Other causes of ill-health	2	1	-	3
8. Multiple defects	-	-	-	-

6. Medical/

6. Medical Treatment.

A. Minor Ailments -

All cases suffering from minor ailments were referred to their family doctors for treatment. The health visitor-nurse visited the homes and, where it was found that necessary treatment had not been carried out, encouraged the parents to have the defects attended to.

B. Defective Vision and Squint -

Report by Dr. Fiona Melville Bennett, School Oculist

Number of children examined	...	...	...	...	59
Number of children with refractive error	...	...	...	...	50
Number of spectacles ordered and 1 new lens for 1 child	...	...	...	...	13

Analysis of Refraction errors

Hypermetropia	17
Myopia	7
Hypermetropic Astigmatism	20
Myopic Astigmatism	6
Emmetropia	4

Pathological conditions met with were -

Convergent Concomitant Strabismus	4
Conjunctivitis	1

C. Nose and Throat (operative treatment) -

All cases were in the first instance referred to the family doctors who arranged for institutional treatment, where necessary.

D. Orthopaedic and Postural Defects (Specialist Treatment) -

The North-Eastern Regional Hospital Board are responsible for the conduct of the Orthopaedic Services. During the year under review, the following statistics are applicable:-

(a) Number of old cases	9
(b) Number of attendances made by these	28
(c) Number of new cases	19
(d) Number of attendances made by new cases	29

7. Dental Inspection and Treatment.

Report by Mr. Charles P. Moore, Chief Dental Officer.

In reviewing the work of the past year, considerable progress has been made in overtaking the arrears of work which had accumulated while the Dental Service in the County was unable to obtain adequate staff.

It is evident from the numbers of children examined and who were found to require no treatment and from the numbers who were having private treatment, that many parents are alive to the desirability of very regular dental care from a fairly early age and have taken steps to ensure this through the National Health Service; especially is this noticeable in those areas which lie adjacent to the larger centres of population.

The carrying out of dental treatment in the Rural Schools still presents some difficulty from the point of view of suitable accommodation.

In/

In the majority of cases however, the use of the dining-room where it was available, or the kitchen provided a solution, the disadvantage being that those places had to be vacated in time to allow the attendant to lay the tables and could not be occupied in the afternoon until washing up operations were completed. This resulted in a somewhat shorter working day, but was unavoidable in the circumstances.

There are one or two schools where no treatment has been carried out yet because of lack of accommodation, this trouble will be largely overcome in the new session as, with the opening of the new extension to the school at Laurencekirk, the Dental Clinic will be available at all times, since it is no longer required as a part-time class-room and so can be used as a centre for treatment of children in that area, from schools without accommodation.

Similarly in the Deeside area, when the new Dental Clinic in Banchory is completed probably by the end of this year or early in 1955, and the addition to the staff of another part-time Dental Surgeon has been made, the children from schools in the district so far untreated will be able to have dental treatment carried out in Banchory under ideal conditions and with modern equipment, with a resulting improvement to the service assured.

This year as in the past conservative work has been the aim of the service with extractions only where unavoidable.

It will be noticed that the number of children actually treated exceeds the number accepting treatment, this is explained by the fact that some children who were examined last year did not have their treatment completed until the commencement of the year under review, which raises the figure above that shown as accepting treatment.

Included in the other operations to permanent teeth are four partial dentures and four orthodontic appliances, two of the latter cases are almost completed with most satisfactory results, while the other two children must continue wearing them for some time yet before their dental condition can be considered satisfactory.

I should like to take this opportunity of thanking Headmasters, Headmistresses and their staffs for their help and co-operation in carrying out my duties and also for encouraging the children in the practice of Dental Hygiene.

The number of children who were examined by the Dental Officer was as follows:-

Age	(a) At systematic examinations	(b) Special and emergency cases	Total
4	9	-	9
5	150	-	150
6	195	-	195
7	172	-	172
8	168	-	168
9	143	-	143
10	164	-	164
11	165	-	165
12	131	-	131
13	116	-	116
14	101	-	101
15	38	-	38
16	20	-	20
17	11	-	11
18	2	-	2
Total	1,583	-	1,583

The/

	(a) Systematic <u>Examinations</u>	(b) Special and <u>emergency cases</u>	<u>Total</u>
The number of children who were -			
(1) Found to require treatment	1,058	-	1,058
(2) Accepting treatment	606	-	606
(3) Percentage acceptance rate	57.27	-	57.27
(4) Actually treated by Dental Officer	746	-	746
(5) Number of attendances made by children for treatment	1,184	-	1,184
(6) Number of fillings -			
(a) Permanent teeth	1,171	-	1,171
(b) Temporary teeth	100	-	100
(7) Extractions -			
(a) Permanent teeth	91	-	91
(b) Temporary teeth	198	-	198
(8) Other operations -			
(a) Permanent teeth	426	-	426
(b) Temporary teeth	42	-	42
4 dentures were supplied			
4 Orthodontic appliances fitted.			
(9) Number of children treated under private arrangements	452	-	452

Report by Mr. H. Main, Part-time Dental Officer.

Regular school dental sessions were held during the period 25th August, 1953, to 29th July, 1954, in "The Briars", Arduthie Road, Stonehaven.

Two mornings per week (Tuesday and Friday) were devoted to treatment, the number of sessions in all totalling 70.

Six half-days were necessary for systematic dental inspections, these inspections being held in Dunnottar Primary School and Stonehaven Primary School respectively.

The willing and helpful co-operation of Headmasters and teaching staffs of these schools was greatly appreciated.

Treatment was continued on Mackie Academy children who were dentally examined in November, 1952. This treatment was completed by November, 1953.

Inspections and routine treatment on children from Dunnottar Primary School followed.

By the end of the summer term 1954, similar work was being carried out at Stonehaven Primary School. This work will be continued in the year 1954 - 1955.

An encouraging feature is the fair percentage of children inspected accepting school dental treatment, viz:- 66.75%.

The total number of fillings completed was 569; extractions 68; other operations 189; emergency cases nil.

The number of children who were examined was as follows:-

Age	(a) At Systematic Examinations	(b) Special and Emergency Cases	Total
4	-	-	-
5	63	-	63
6	85	-	85
7	75	-	75
8	51	-	51
9	60	-	60
10	54	-	54
11	53	-	53
12	36	-	36
13	9	-	9
14	1	-	1
15	1	-	1
16	-	-	-
Total	488	-	488

	(a) Systematic <u>Examinations</u>	(b) Special and <u>emergency cases</u>	<u>Total</u>
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The number of children who
were -

(1) Found to require treatment	364	-	364
(2) Accepting treatment	243	-	243
(3) Percentage acceptance rate	66.75	-	66.75
(4) Actually treated	229	-	229
(5) Number of attendances made by children	481	-	481
(6) Number of fillings -			
(a) Permanent teeth	403	-	403
(b) Temporary teeth	166	-	166
(7) Number of extractions -			
(a) Permanent teeth	47	-	47
(b) Temporary teeth	21	-	21
(8) Other operations -			
(a) Permanent teeth	168	-	168
(b) Temporary teeth	21	-	21
(9) Half-days devoted to systematic examinations	6	-	6
(10) Half-days devoted to treatment	70	-	70
(11) Number of children treated under private arrangements	121	-	121

8. Special Schools and Classes.

Neither special schools nor classes are provided in the County of Kincardine for children handicapped by physical or mental defects.

Psychologically abnormal children are dealt with at the Child Guidance Clinic in Aberdeen.

9. Arrangements for Physical Education and Personal Hygiene.

Whenever practicable, playgrounds have been tarmacadamised.

10. Other/

10. Other activities in relation to the health of school children.

(1) Milk in Schools Scheme -

(a) Number of schools participating in the scheme	...	...	...	44
(b) Number of children taking milk daily	...	...	...	3,148
(c) Percentage of school population taking milk	..	...		69.2%

(2) School Meals Service -

(a) Number of pupils receiving dinners	...	...	...	2,601
(b) Number of children receiving light meals	...	...		24
(c) Number of children receiving soup meals.	...	...		Nil
(d) Number of schools at which dinners were provided				42
(e) Number of schools at which light meals were provided				1
(f) Number of schools at which a soup meal was provided				Nil
(g) The Committee's scheme for the partial or full remission of charges has now been in operation for one year and consideration is at present being given to the possibility of its amendment. It is hoped that, in the course of Session 1954-55, scullery provision at Gourdon and Brae Primary Schools will be completed so that thereby all Schools will have the service of meals.				

